

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

RECEIVED  
CITY OF SAN ANTONIO  
2003 MAY 19 12 5:02

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages this report:

1/13

3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Philip A.		OFFICE USE ONLY Date Received
	NICKNAME LAST SUFFIX Phil Cortez		
4 CANDIDATE / OFFICEHOLDER ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 240758 San Antonio TX 78224		Date Hand-delivered or Date Postmarked
	5 CAMPAIGN TREASURER NAME TITLE FIRST MI Rose NICKNAME LAST SUFFIX Cortez		Receipt # Amount Date Processed Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 351 McNamey San Antonio TX 78211		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 923-1557		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 04/24/2003    05/16/2003		
10 ELECTION	ELECTION DATE Month Day Year 05/27/2003	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Other -- City Council 4	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

14 C/OH NAME

Philip "Phil" Cortez

2003 MAY 19 P 5:02

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 NO REPORTABLE  
ACTIVITY☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)18 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 11,300.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 11,792.71

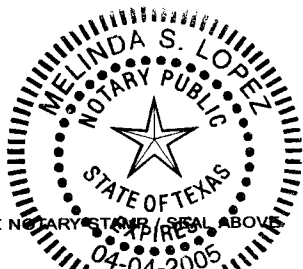
OUTSTANDING  
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY SEAL ABOVE

*Philip Cortez*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Philip Cortez, this the 19th day of May, 2003, to certify which, witness my hand and seal of office.

*Melinda S. Lopez*  
Signature of officer administering oath

Melinda S. Lopez  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED  
CITY OF SAN ANTONIO  
OFFICE OF THE CLERK

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 10 50 AM

Total pages this report:

3/13

## 2 FILER NAME

Philip A. Cortez

## 3 ACCOUNT # (Ethics Commission filers)

## 4 Date

05/14/2003

## 5 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

James P. Aleman

## 6 Contributor address; City; State; Zip Code

1866 Grandstand

San Antonio TX 78238

## 7 Amount of contribution (\$)

500.00

## 8 In-kind contribution description (if applicable)

## 9 Principal occupation (Optional)

## 10 Employer (Optional)

## Date

05/02/2003

## Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Carol Alvarado

## Contributor address; City; State; Zip Code

9213 E. Avenue L

Houston TX 77012

## Amount of contribution (\$)

250.00

## In-kind contribution description (if applicable)

## Principal occupation (Optional)

## Employer (Optional)

## Date

04/30/2003

## Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

American Federation of State, County, and Municipal Employees

## Contributor address; City; State; Zip Code

1625 L. St. NW

Washington DC 20036

## Amount of contribution (\$)

400.00

## In-kind contribution description (if applicable)

## Principal occupation (Optional)

## Employer (Optional)

## Date

04/24/2003

## Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Leon Backes

## Contributor address; City; State; Zip Code

17440 N. Dallas Parkway

Suite 230

Dallas TX 75287

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

## Principal occupation (Optional)

## Employer (Optional)

## Date

05/03/2003

## Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Rose Cortez

## Contributor address; City; State; Zip Code

351 McNamey

San Antonio TX 78211

## Amount of contribution (\$)

250.00

## In-kind contribution description (if applicable)

security for Election Day party

## Principal occupation (Optional)

## Employer (Optional)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A 1 (FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:

5-02 4/13

2 FILER NAME

Philip A. Cortez

3 ACCOUNT # (Ethics Commission filers)

4 Date

04/24/2003

5 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Davidson and Troilo Committee for Civic Awareness

6 Contributor address; City; State; Zip Code

7550 IH-10 West

Suite 800

San Antonio TX 78229-5816

7 Amount of  
contribution (\$)

250.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

04/29/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Jerome Falic

Contributor address; City; State; Zip Code

FL

Amount of  
contribution (\$)

500.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

04/25/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Leon Falic

Contributor address; City; State; Zip Code

19495 Biscayne Blvd.

Suite 300

Aventura FL 33180

Amount of  
contribution (\$)

500.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

04/25/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

Simon Falic

Contributor address; City; State; Zip Code

FL

Amount of  
contribution (\$)

500.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

04/24/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)

James Fisher III

Contributor address; City; State; Zip Code

3813 Mockingbird

Dallas TX 75205

Amount of  
contribution (\$)

500.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED  
CITY OF AUSTIN  
OFFICE OF THE CLERK

## SCHEDULE A 1

(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY

19 Total pages in this report:  
5/13

### 2 FILER NAME

Philip A. Cortez

### 3 ACCOUNT #

(Ethics Commission filers)

### 4 Date

04/24/2003

### 5 Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

James Fisher II

6 Contributor address; City; State; Zip Code  
3813 Mockingbird

Dallas TX 75205

### 7 Amount of contribution (\$)

500.00

### 8 In-kind contribution description (if applicable)

### 9 Principal occupation (Optional)

### 10 Employer (Optional)

### Date

04/24/2003

### Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Lisa M. Fisher

Contributor address; City; State; Zip Code  
3813 Mockingbird

Dallas TX 75205

### Amount of contribution (\$)

500.00

### In-kind contribution description (if applicable)

### Principal occupation (Optional)

### Employer (Optional)

### Date

04/24/2003

### Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Melissa Fisher

Contributor address; City; State; Zip Code  
3813 Mockingbird

Dallas TX 75205

### Amount of contribution (\$)

500.00

### In-kind contribution description (if applicable)

### Principal occupation (Optional)

### Employer (Optional)

### Date

04/24/2003

### Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Matthew Harris

Contributor address; City; State; Zip Code  
2752 Gaston Ave. 13310

Dallas TX 75226

### Amount of contribution (\$)

500.00

### In-kind contribution description (if applicable)

### Principal occupation (Optional)

### Employer (Optional)

### Date

04/24/2003

### Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Scott Helbing

Contributor address; City; State; Zip Code  
2302 Windsor Rd.

Austin TX 78703

### Amount of contribution (\$)

100.00

### In-kind contribution description (if applicable)

### Principal occupation (Optional)

### Employer (Optional)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A 1

(FOR FORMS C/OH &amp; SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19

1 Total pages this report:

6/43

## 2 FILER NAME

Philip A. Cortez

## 3 ACCOUNT #

(Ethics Commission filers)

## 4 Date

04/24/2003

## 5 Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Saleem Jafar

## 7 Amount of contribution (\$)

500.00

## 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
15107 Canyon Crest

Dallas TX 75248

## 9 Principal occupation (Optional)

## 10 Employer (Optional)

## Date

05/07/2003

## Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Martin, Drought, and Torres Inc.

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
300 Convent St.  
25th Floor  
San Antonio TX 78205

## Principal occupation (Optional)

## Employer (Optional)

## Date

05/14/2003

## Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Osirus, Inc.

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1866 Grandstand  
San Antonio TX 78238

## Principal occupation (Optional)

## Employer (Optional)

## Date

04/24/2003

## Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Shelton Padgett

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
300 Convent St.  
Suite 1500  
San Antonio TX 78205

## Principal occupation (Optional)

## Employer (Optional)

## Date

05/04/2003

## Full name of contributor

☐ out-of-state PAC(ID# \_\_\_\_\_)

Ignacio Perez III

## Amount of contribution (\$)

500.00

## In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
211 Leigh  
San Antonio TX 78210

## Principal occupation (Optional)

## Employer (Optional)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19

1 Total pages this report:  
7/13

2 FILER NAME  
Philip A. Cortez

3 ACCOUNT # (Ethics Commission filers)

4 Date  
05/15/2003

5 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
SEIU C.O.P.E. Fund

6 Contributor address; City; State; Zip Code  
1313 L Street NW  
Washington DC 20005

7 Amount of contribution (\$)  
500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date  
04/24/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
San Antonio Board of Realtors

Contributor address; City; State; Zip Code  
9110 IH 10 W  
San Antonio TX 78230

Amount of contribution (\$)  
500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
05/16/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
San Antonio Firefighters P.A.C.

Contributor address; City; State; Zip Code  
8925 West IH 10  
San Antonio TX 78230

Amount of contribution (\$)  
500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
05/13/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Texas Coalition for Good Government

Contributor address; City; State; Zip Code  
2211 Norfolk  
Suite 1150  
Houston TX 77098

Amount of contribution (\$)  
300.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
05/10/2003

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Endy Tseng

Contributor address; City; State; Zip Code  
1831 Fawn Bluff  
San Antonio TX 78248

Amount of contribution (\$)  
250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages this report:  
8/13**2** FILER NAME  
Philip A. Cortez**3** ACCOUNT # (Ethics Commission filers)**4** Date  
04/29/2003**5** Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
USAA Group PAC**7** Amount of  
contribution (\$)

500.00

**8** In-kind contribution  
description (if applicable)**6** Contributor address; City; State; Zip Code  
9800 Fredericksburg  
USAA Building-OP-1-E  
San Antonio TX 78288**9** Principal occupation (Optional)**10** Employer (Optional)RECEIVED  
CITY OF AUSTIN  
2003 JUN 19 P 5 02



**POLITICAL EXPENDITURES**

RECEIVED  
CITY OF AUSTIN  
OFFICE

**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 PM 5

1 Total pages report:  
9/13**2 FILER NAME**

Philip A. Cortez

**3 ACCOUNT #** (Ethics Commission filers)**4 Date**

05/14/2003

**5 Payee name**

Allied Advertising

**7**

Amount

(\$)

1500.00

**6 Payee address; City; State; Zip Code**

3700 Blanco Rd.

San Antonio TX 78212

**8 Purpose of expenditure** (See instructions regarding type of information required.)  
signs**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

05/12/2003

**Payee name**

William Cantu

Amount

(\$)

400.00

**Payee address; City; State; Zip Code**

5454 Dabney

San Antonio TX 78227

**Purpose of expenditure** (See instructions regarding type of information required.)  
sound system and monitors for band on Election Day**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

04/26/2003

**Payee name**

Cash

Amount

(\$)

275.00

**Payee address; City; State; Zip Code**

TX

**Purpose of expenditure** (See instructions regarding type of information required.)  
money for blockwalkers-4/26/03**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

05/03/2003

**Payee name**

Cash

Amount

(\$)

1748.00

**Payee address; City; State; Zip Code**

TX

**Purpose of expenditure** (See instructions regarding type of information required.)  
money for blockwalkers-5/3/03**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2003 MAY 19 P 3

1 Total pages report:  
10/13**2 FILER NAME**

Philip A. Cortez

**3 ACCOUNT #** (Ethics Commission filers)**4 Date**

05/12/2003

**5 Payee name**

Chris Castro

**7 Amount**(\$)  
620.85**6 Payee address; City; State; Zip Code**5100 NW Loop 410  
# 2405  
San Antonio TX 78229**8 Purpose of expenditure** (See instructions regarding type of information required.)  
reimbursement**9 Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**

04/30/2003

**Payee name**

Crumrine Printers

**Amount**(\$)  
1111.09**Payee address; City; State; Zip Code**2030 E. Houston St.  
San Antonio TX 78202**Purpose of expenditure** (See instructions regarding type of information required.)  
printing services-3rd mailout**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**

04/29/2003

**Payee name**

Easy Drive

**Amount**(\$)  
248.11**Payee address; City; State; Zip Code**906 Ruiz  
San Antonio TX 78207**Purpose of expenditure** (See instructions regarding type of information required.)  
stakes**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**

05/16/2003

**Payee name**

Easy Drive

**Amount**(\$)  
336.57**Payee address; City; State; Zip Code**906 Ruiz  
San Antonio TX 78207**Purpose of expenditure** (See instructions regarding type of information required.)  
stakes**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
11/13**2** FILER NAME  
Philip A. Cortez**3** ACCOUNT # (Ethics Commission filers)**4** Date  
05/12/2003**5** Payee name  
Election Support Services**7** Amount  
(\$)  
1000.00**6** Payee address; City; State; Zip Code  
4958 W. Military Dr.  
San Antonio TX 78242**8** Purpose of expenditure (See instructions regarding type of information required.)  
phonebanking**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held**Date**  
05/07/2003**Payee name**  
Enterprise Rental**Amount**  
(\$)  
892.20**Payee address; City; State; Zip Code**  
1715 SE Military Dr.  
San Antonio TX 78214**Purpose of expenditure (See instructions regarding type of information required.)**  
rental cars for Early Voting rides**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
05/08/2003**Payee name**  
Janal's Wholesale**Amount**  
(\$)  
122.98**Payee address; City; State; Zip Code**  
1942 N. St. Mary's St.  
San Antonio TX 78212**Purpose of expenditure (See instructions regarding type of information required.)**  
flowers for Mother's Day senior center visits**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
05/02/2003**Payee name**  
Kevin Lopez**Amount**  
(\$)  
500.00**Payee address; City; State; Zip Code**  
602 E. Locust  
San Antonio TX 78212**Purpose of expenditure (See instructions regarding type of information required.)**  
salary**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:

12/13

**2 FILER NAME**

Philip A. Cortez

**3 ACCOUNT #** (Ethics Commission filers)**4 Date**

05/12/2003

**5 Payee name**

Office Communications Systems

**7 Amount**

(\$)

21.58

**6 Payee address; City; State; Zip Code**

10231 Kotzebue

San Antonio TX 78217

**8 Purpose of expenditure** (See instructions regarding type of information required.)

copier toner

**9 Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

04/28/2003

**Payee name**

PC Mailing Services

**Amount**

(\$)

1006.78

**Payee address; City; State; Zip Code**

10711 Hillpoint Dr.

San Antonio TX 78217

**Purpose of expenditure** (See instructions regarding type of information required.)

mailing services

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

05/12/2003

**Payee name**

Qwik Print

**Amount**

(\$)

189.27

**Payee address; City; State; Zip Code**

500 Sixth Street

San Antonio TX 78215

**Purpose of expenditure** (See instructions regarding type of information required.)

letterhead and envelopes

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**Date**

05/16/2003

**Payee name**

Qwik Print

**Amount**

(\$)

809.28

**Payee address; City; State; Zip Code**

500 Sixth Street

San Antonio TX 78215

**Purpose of expenditure** (See instructions regarding type of information required.)

letterhead and envelopes

**Complete if direct expenditure to benefit C/OH \*\***

Candidate / Officeholder name

Office sought

Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
13/13**2** FILER NAME  
Philip A. Cortez**3** ACCOUNT # (Ethics Commission filers)**4** Date  
05/12/2003**5** Payee name  
R.S.V. Investments, Inc.**6** Payee address; City; State; Zip Code  
3421 Nogalitos St.  
San Antonio TX 78225**7** Amount  
(\$)  
900.00**8** Purpose of expenditure (See instructions regarding type of information required.)  
office rent**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldDate  
05/12/2003Payee name  
United States Postal ServicePayee address; City; State; Zip Code  
7411 Barlite Blvd.  
Tejeda Station  
San Antonio TX 78224Amount  
(\$)  
111.00Purpose of expenditure (See instructions regarding type of information required.)  
postageComplete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office heldRECEIVED  
CITY OF AUSTIN  
MAY 13 2003  
2003 MAY 13 PM 5:03